

**Fill in this information to identify the case:**

Debtor Hi-Tech Pharmacal Co., Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of Delaware  
(State)

Case number 20-11189

Official Form 410  
**Proof of Claim**

04/19

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

**Part 1: Identify the Claim**

<b>1. Who is the current creditor?</b>	<u>BELL ENVIRONMENTAL SERVICES INC</u> Name of the current creditor (the person or entity to be paid for this claim)	
	Other names the creditor used with the debtor _____	
<b>2. Has this claim been acquired from someone else?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
<b>3. Where should notices and payments to the creditor be sent?</b>  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<b>Where should notices to the creditor be sent?</b>	<b>Where should payments to the creditor be sent? (if different)</b>
	<u>BELL ENVIRONMENTAL SERVICES INC</u>	
	<u>PO BOX 810</u>	
	<u>PINE BROOK, NJ 07058</u>	
	Contact phone _____	Contact phone _____
	Contact email <u>Dkaminski@bellenv.com</u>	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	
<b>4. Does this claim amend one already filed?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ <div style="text-align: right;">MM / DD / YYYY</div>	
<b>5. Do you know if anyone else has filed a proof of claim for this claim?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	



**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor?  No  
 Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 1069 \_\_\_\_

7. How much is the claim? \$ 3,384.76. Does this amount include interest or other charges?  
 No  
 Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  
Limit disclosing information that is entitled to privacy, such as health care information.  
Pest Control

9. Is all or part of the claim secured?  No  
 Yes. The claim is secured by a lien on property.  
**Nature or property:**  
 Real estate: If the claim is secured by the debtor's principle residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.  
 Motor vehicle  
 Other. Describe: \_\_\_\_\_  
**Basis for perfection:** \_\_\_\_\_  
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)  
**Value of property:** \$ \_\_\_\_\_  
**Amount of the claim that is secured:** \$ \_\_\_\_\_  
**Amount of the claim that is unsecured:** \$ \_\_\_\_\_ (The sum of the secured and unsecured amount should match the amount in line 7.)  
**Amount necessary to cure any default as of the date of the petition:** \$ \_\_\_\_\_  
**Annual Interest Rate** (when case was filed) \_\_\_\_\_ %  
 Fixed  
 Variable

10. Is this claim based on a lease?  No  
 Yes. Amount necessary to cure any default as of the date of the petition. \$ \_\_\_\_\_

11. Is this claim subject to a right of setoff?  No  
 Yes. Identify the property: \_\_\_\_\_



12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

No

Yes. Check all that apply:

	Amount entitled to priority
<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
<input type="checkbox"/> Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____
<input type="checkbox"/> Wages, salaries, or commissions (up to \$13,650*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$ _____
<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies.	\$ _____

\* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after the date of adjustment.

13. Is all or part of the claim pursuant to 11 U.S.C. § 503(b)(9)?

No

Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

\$ \_\_\_\_\_

**Part 3: Sign Below**

**The person completing this proof of claim must sign and date it. FRBP 9011(b).**

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

**A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.**

*Check the appropriate box:*

I am the creditor.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 11/10/2020  
MM / DD / YYYY

/s/Donna Kaminski  
Signature

**Print the name of the person who is completing and signing this claim:**

Name Donna Kaminski  
First name Middle name Last name

Title Service and Routing Coordinator

Company Bell Environmental Services  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address \_\_\_\_\_

Contact phone \_\_\_\_\_ Email \_\_\_\_\_



# KCC ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (877) 725-7539 | International (424) 236-7247

<b>Debtor:</b> 20-11189 - Hi-Tech Pharmacal Co., Inc.		
<b>District:</b> District of Delaware		
<b>Creditor:</b> BELL ENVIRONMENTAL SERVICES INC PO BOX 810 PINE BROOK, NJ, 07058 <b>Phone:</b> <b>Phone 2:</b> <b>Fax:</b> <b>Email:</b> Dkaminski@bellenv.com	<b>Has Supporting Documentation:</b> Yes, supporting documentation successfully uploaded <b>Related Document Statement:</b>	
	<b>Has Related Claim:</b> No <b>Related Claim Filed By:</b>	
	<b>Filing Party:</b> Creditor	
<b>Other Names Used with Debtor:</b>	<b>Amends Claim:</b> No <b>Acquired Claim:</b> No	
<b>Basis of Claim:</b> Pest Control	<b>Last 4 Digits:</b> Yes - 1069	<b>Uniform Claim Identifier:</b>
<b>Total Amount of Claim:</b> 3,384.76	<b>Includes Interest or Charges:</b> No	
<b>Has Priority Claim:</b> No	<b>Priority Under:</b>	
<b>Has Secured Claim:</b> No <b>Amount of 503(b)(9):</b> No <b>Based on Lease:</b> No <b>Subject to Right of Setoff:</b> No	<b>Nature of Secured Amount:</b> <b>Value of Property:</b> <b>Annual Interest Rate:</b> <b>Arrearage Amount:</b> <b>Basis for Perfection:</b> <b>Amount Unsecured:</b>	
<b>Submitted By:</b> Donna Kaminski on 10-Nov-2020 10:24:15 a.m. Eastern Time <b>Title:</b> Service and Routing Coordinator <b>Company:</b> Bell Environmental Services		

# Invoice / Statement of Account



Remittance:  
**Bell Environmental Services**  
**PO Box 810**  
**Pine Brook, NJ 07058**

Phone: **(973) 575-7800**

Fax: **(973) 575-1177**

[www.Bell-Environmental.com](http://www.Bell-Environmental.com)

## Bill To:

AP V#2502070  
 Akorn Pharmaceuticals  
 1925 W FIELD CT  
 Suite 300  
 Lake Forest, IL 60045-4824

## Location:

Akorn Pharmaceuticals  
 369 BAYVIEW AVE  
 Amityville, NY 11701-2801

## Invoice :

Account #	Location #	Purchase Order	Terms	Invoice Date	Invoice #
101069	101069	4500020596	ON RECEIPT	08/31/20	249472
Quantity	Code	Description	Unit Price	Amount	
1	GILBULB20	Gilbert Bulb - 20w - Replaced during 8/18 Service Visit	16.00	16.00	
				Materials Cost:	16.00
				Subtotal:	16.00
				Tax:	1.38
				<b>Total:</b>	<b>\$ 17.38</b>

## Statement of Account:

Date	Account #	Current	30 Days	60 Days	90+ Days	Total Outstanding
11/10/2020	101069	3,562.69	3,386.88	3,384.76	0.00	10,334.33



Bell Environmental Services, Inc.  
 229 New Road  
 Parsippany, NJ 07054  
 973-575-7800

**Service Inspection Report**

**INVOICE #: A249397**

WORK DATE: 8/18/2020

**BILL-TO 101069**

Akorn Pharmaceuticals  
 AP V# 2502070  
 1925 W FIELD CT  
 Suite 300  
 Lake Forest, IL 60045-4824

Phone: 631-789-8228 x4201

**LOCATION 101069**

Akorn Pharmaceuticals  
 369 BAYVIEW AVE  
 Amityville, NY 11701-2801

Phone: 516-427-8164 x4169

Time In: 8/18/2020 8:07 AM  
 Time Out: 8/18/2020 11:55 AM

Customer Signature

Customer Unavailable to Sign  
 Technician Signature

*Daniel C Perry*  
 73613C

Daniel Perry  
 License #:

Purchase Order	Terms	Service Description	Quantity
4500020596	ON RECEIPT	Pest Control Service	1.00

**GENERAL COMMENTS / INSTRUCTIONS**

Inspection Detail/Pest Findings Key:  
 C=Captured  
 S=Sighted  
 E=Evidence

In an effort to limit the spread of COVID-19, we are refraining from collecting client signatures on our smart phones/tablets.

Serviced as needed . Checked all traps  
 Replaced catch-it's as needed  
 Inspected insect light traps  
 13 edison - 1 mouse found k-all #20  
 Reset trap  
 225 edison- complaint of ants in rear office 11-b  
 Baited area with advion ant gel

**PRODUCTS APPLICATION SUMMARY**

Material	Lot #	EPA #	A.I. %	A.I. Conc.	Active Ingredient	Finished Qty	Undiluted Qty
Advion Ant Gel		100-1498	0.0500%	n/a	Indoxacarb	10.0000 Grams	10.0000 Grams
<b>Areas Applied:</b> Interior <b>Target Pests:</b> Ants							
Catch-its		n/a	0.0000%	n/a	n/a	47.0000 Each	
<b>Areas Applied:</b> Interior <b>Target Pests:</b> (None)							
Gilbert Bulb 20 Watt		n/a	0.0000%	n/a	n/a	1.0000 Each	
<b>Areas Applied:</b> Interior <b>Target Pests:</b> (None)							

**AREA COMMENTS**

None Noted.

**INSPECTION DETAIL**

# Invoice / Statement of Account



Remittance:  
**Bell Environmental Services**  
**PO Box 810**  
**Pine Brook, NJ 07058**

Phone: (973) 575-7800

Fax: (973) 575-1177

[www.Bell-Environmental.com](http://www.Bell-Environmental.com)

## Bill To:

AP V#2502070  
 Akorn Pharmaceuticals  
 1925 W FIELD CT  
 Suite 300  
 Lake Forest, IL 60045-4824

## Location:

Akorn Pharmaceuticals  
 369 BAYVIEW AVE  
 Amityville, NY 11701-2801

## Invoice :

Account #	Location #	Purchase Order	Terms	Invoice Date	Invoice #
101069	101069	4500020596	ON RECEIPT	09/01/20	251135
Quantity	Code	Description	Unit Price	Amount	
1	PCS	Pest Control Service	3,100.00	3,100.00	
				Materials Cost:	0.00
				Subtotal:	3,100.00
				Tax:	267.38
				<b>Total:</b>	<b>\$ 3,367.38</b>

## Statement of Account:

Date	Account #	Current	30 Days	60 Days	90+ Days	Total Outstanding
11/10/2020	101069	3,562.69	3,386.88	3,384.76	0.00	10,334.33



Bell Environmental Services, Inc.  
 229 New Road  
 Parsippany, NJ 07054  
 973-575-7800

**Service Inspection Report**

**INVOICE #: A251130**

WORK DATE: 9/1/2020

**BILL-TO 101069**

Akorn Pharmaceuticals  
 AP V# 2502070  
 1925 W FIELD CT  
 Suite 300  
 Lake Forest, IL 60045-4824

Phone: 631-789-8228 x4201

**LOCATION 101069**

Akorn Pharmaceuticals  
 369 BAYVIEW AVE  
 Amityville, NY 11701-2801

Phone: 516-427-8164 x4169

Time In: 9/1/2020 8:00 AM  
 Time Out: 9/1/2020 12:15 PM

Customer Signature

Customer Unavailable to Sign  
 Technician Signature

*[Handwritten Signature]*  
 73613C

Daniel Perry  
 License #:

Purchase Order	Terms	Service Description	Quantity
4500020596	ON RECEIPT	Pest Control Service	1.00

**GENERAL COMMENTS / INSTRUCTIONS**

Inspection Detail/Pest Findings Key:  
 C=Captured  
 S=Sighted  
 E=Evidence

In an effort to limit the spread of COVID-19, we are refraining from collecting client signatures on our smart phones/tablets.  
 Serviced as needed . Checked all traps  
 Replaced catch-it's as needed  
 No pest found

**PRODUCTS APPLICATION SUMMARY**

Material	Lot #	EPA #	A.I. %	A.I. Conc.	Active Ingredient	Finished Qty	Undiluted Qty
Catch-its		n/a	0.0000%	n/a	n/a	69.0000 Each	
<b>Areas Applied:</b> Interior <b>Target Pests:</b> (None)							

Material	Lot #	EPA #	A.I. %	A.I. Conc.	Active Ingredient	Finished Qty	Undiluted Qty
Insect light trap glue board		n/a	0.0000%	n/a	n/a	13.0000 Each	
<b>Areas Applied:</b> Interior <b>Target Pests:</b> Flies							

**AREA COMMENTS**

None Noted.

**INSPECTION DETAIL**

Area	Time	Type	Status	Pest Findings
Interior	12:15:17 PM	Area	No Activity	

**PRODUCTS APPLIED**

Material	A.I. %	Finished Qty	Application Equipment	Application Rate	Lot #
EPA #	A.I. Concentration	Undiluted Qty	Application Method	Sq/Cu/L Ft	
Catch-its	0.0000%	69.0000 Each			





Bell Environmental Services, Inc.  
 229 New Road  
 Parsippany, NJ 07054  
 973-575-7800

**Service Inspection Report**

**INVOICE #: A251130**

WORK DATE: 9/1/2020

**PRODUCTS APPLIED**

Material	A.I. %	Finished Qty	Application Equipment	Application Rate	
EPA #	A.I. Concentration	Undiluted Qty	Application Method	Sq/Cu/L Ft	Lot #

n/a  
**Areas Applied:** Interior - Interior

Insect light trap glue board      0.0000%      13.0000 Each  
 n/a

**Target Pests:** Flies  
**Areas Applied:** Interior - Interior



Bell Environmental Services, Inc.  
 229 New Road  
 Parsippany, NJ 07054  
 973-575-7800

**Service Inspection Report**

**INVOICE #: A251131**

WORK DATE: 9/8/2020

**BILL-TO 101069**

Akorn Pharmaceuticals  
 AP V# 2502070  
 1925 W FIELD CT  
 Suite 300  
 Lake Forest, IL 60045-4824

Phone: 631-789-8228 x4201

**LOCATION 101069**

Akorn Pharmaceuticals  
 369 BAYVIEW AVE  
 Amityville, NY 11701-2801

Phone: 516-427-8164 x4169

Time In: 9/8/2020 7:30 AM  
 Time Out: 9/8/2020 1:11 PM

Customer Signature

Customer Unavailable to Sign  
 Technician Signature

*[Handwritten Signature]*  
 73613C

Daniel Perry  
 License #:

Purchase Order	Terms	Service Description	Quantity
4500020596	ON RECEIPT	Pest Control Service	1.00

**GENERAL COMMENTS / INSTRUCTIONS**

Inspection Detail/Pest Findings Key:  
 C=Captured  
 S=Sighted  
 E=Evidence

Serviced as needed . Checked all traps  
 Replaced catch-it's as needed  
 Inspected exterior bait stations  
 Inspected insect light traps  
 No pest found  
 In an effort to limit the spread of COVID-19, we are refraining from collecting client signatures on our smart phones/tablets.

**PRODUCTS APPLICATION SUMMARY**

Material	Lot #	EPA #	A.I. %	A.I. Conc.	Active Ingredient	Finished Qty	Undiluted Qty
Catch-its		n/a	0.0000%	n/a	n/a	71.0000 Each	
<b>Areas Applied:</b> Interior <b>Target Pests:</b> (None)							
Ketch-all mousetrap		n/a	0.0000%	n/a	n/a	1.0000 Each	
<b>Areas Applied:</b> Interior <b>Target Pests:</b> Rodents							

**AREA COMMENTS**

None Noted.

**INSPECTION DETAIL**

Area	Time	Type	Status	Pest Findings
Interior	12:12:08 PM	Area	No Activity	

**PRODUCTS APPLIED**

Material	A.I. %	Finished Qty	Application Equipment	Application Rate	Lot #
EPA #	A.I. Concentration	Undiluted Qty	Application Method	Sq/Cu/L Ft	



Bell Environmental Services, Inc.  
 229 New Road  
 Parsippany, NJ 07054  
 973-575-7800

**Service Inspection Report**

**INVOICE #: A251131**

WORK DATE: 9/8/2020

**PRODUCTS APPLIED**

Material	A.I. %	Finished Qty	Application Equipment	Application Rate	
EPA #	A.I. Concentration	Undiluted Qty	Application Method	Sq/Cu/L Ft	Lot #
Catch-its	0.0000%	71.0000 Each			
	n/a				

**Areas Applied:** Interior - Interior

Ketch-all mousetrap	0.0000%	1.0000 Each	Trap for small rodents		
	n/a		Hand installation		

**Target Pests:** Rodents

**Areas Applied:** Interior - Interior



Bell Environmental Services, Inc.  
 229 New Road  
 Parsippany, NJ 07054  
 973-575-7800

**Service Inspection Report**

**INVOICE #: A251132**

WORK DATE: 9/15/2020

**BILL-TO 101069**

Akorn Pharmaceuticals  
 AP V# 2502070  
 1925 W FIELD CT  
 Suite 300  
 Lake Forest, IL 60045-4824

Phone: 631-789-8228 x4201

**LOCATION 101069**

Akorn Pharmaceuticals  
 369 BAYVIEW AVE  
 Amityville, NY 11701-2801

Phone: 516-427-8164 x4169

Time In: 9/15/2020 8:22 AM

Time Out: 9/15/2020 1:03 PM

Customer Signature

Customer Unavailable to Sign  
 Technician Signature

*[Handwritten Signature]*  
 73613C

Daniel Perry  
 License #:

Purchase Order	Terms	Service Description	Quantity
4500020596	ON RECEIPT	Pest Control Service	1.00

**GENERAL COMMENTS / INSTRUCTIONS**

Inspection Detail/Pest Findings Key:  
 C=Captured  
 S=Sighted  
 E=Evidence

In an effort to limit the spread of COVID-19, we are refraining from collecting client signatures on our smart phones/tablets.  
 Serviced as needed . Checked all traps  
 Replaced catch-it's as needed  
 Inspected insect light traps:  
 No pest found

**PRODUCTS APPLICATION SUMMARY**

Material	Lot #	EPA #	A.I. %	A.I. Conc.	Active Ingredient	Finished Qty	Undiluted Qty
Catch-its		n/a	0.0000%	n/a	n/a	64.0000 Each	
<b>Areas Applied:</b> Interior							
<b>Target Pests:</b> (None)							

**AREA COMMENTS**

None Noted.

**INSPECTION DETAIL**

Area	Time	Type	Status	Pest Findings
Interior	12:32:30 PM	Area	No Activity	

**PRODUCTS APPLIED**

Material	A.I. %	Finished Qty	Application Equipment	Application Rate	Lot #
EPA #	A.I. Concentration	Undiluted Qty	Application Method	Sq/Cu/L Ft	
Catch-its	0.0000%	64.0000 Each			
<b>Areas Applied:</b> Interior - Interior					



Bell Environmental Services, Inc.  
 229 New Road  
 Parsippany, NJ 07054  
 973-575-7800

**Service Inspection Report**

**INVOICE #: A251133**

WORK DATE: 9/22/2020

**BILL-TO 101069**

Akorn Pharmaceuticals  
 AP V# 2502070  
 1925 W FIELD CT  
 Suite 300  
 Lake Forest, IL 60045-4824

Phone: 631-789-8228 x4201

**LOCATION 101069**

Akorn Pharmaceuticals  
 369 BAYVIEW AVE  
 Amityville, NY 11701-2801

Phone: 516-427-8164 x4169

Time In: 9/22/2020 8:06 AM

Time Out: 9/22/2020 12:23 PM

Customer Signature

Customer Unavailable to Sign  
 Technician Signature

*[Handwritten Signature]*  
 73613C

Daniel Perry  
 License #:

Purchase Order	Terms	Service Description	Quantity
4500020596	ON RECEIPT	Pest Control Service	1.00

**GENERAL COMMENTS / INSTRUCTIONS**

Inspection Detail/Pest Findings Key:  
 C=Captured  
 S=Sighted  
 E=Evidence

In an effort to limit the spread of COVID-19, we are refraining from collecting client signatures on our smart phones/tablets.

Serviced as needed . Checked all traps  
 Replaced catch-it's as needed  
 Inspected exterior bait stations  
 No pest found

**PRODUCTS APPLICATION SUMMARY**

Material	Lot #	EPA #	A.I. %	A.I. Conc.	Active Ingredient	Finished Qty	Undiluted Qty
Catch-its		n/a	0.0000%	n/a	n/a	56.0000 Each	
<b>Areas Applied:</b> Interior							
<b>Target Pests:</b> (None)							

**AREA COMMENTS**

*None Noted.*

**INSPECTION DETAIL**

Area	Time	Type	Status	Pest Findings
Interior	12:20:25 PM	Area	No Activity	

**PRODUCTS APPLIED**

Material	A.I. %	Finished Qty	Application Equipment	Application Rate	Lot #
EPA #	A.I. Concentration	Undiluted Qty	Application Method	Sq/Cu/L Ft	
Catch-its	0.0000%	56.0000 Each			
	n/a				
<b>Areas Applied:</b> Interior - Interior					



Bell Environmental Services, Inc.  
 229 New Road  
 Parsippany, NJ 07054  
 973-575-7800

**Service Inspection Report**

**INVOICE #: A251134**

WORK DATE: 9/29/2020

**BILL-TO 101069**

Akorn Pharmaceuticals  
 AP V#2502070  
 1925 W FIELD CT  
 Suite 300  
 Lake Forest, IL 60045-4824

Phone: 631-789-8228 x4201

**LOCATION 101069**

Akorn Pharmaceuticals  
 369 BAYVIEW AVE  
 Amityville, NY 11701-2801

Phone: 516-427-8164 x4169

Time In: 9/29/2020 9:26 AM

Time Out: 9/29/2020 2:05 PM

Customer Signature

Customer Unavailable to Sign

Technician Signature

*Daniel C Perry*  
 73613C

Daniel Perry

License #:

<b>Purchase Order</b>	<b>Terms</b>	<b>Service Description</b>	<b>Quantity</b>
4500020596	ON RECEIPT	Pest Control Service	1.00

**GENERAL COMMENTS / INSTRUCTIONS**

Inspection Detail/Pest Findings Key:  
 C=Captured  
 S=Sighted  
 E=Evidence

In an effort to limit the spread of COVID-19, we are refraining from collecting client signatures on our smart phones/tablets.  
 Serviced as needed . Checked all traps  
 Replaced catch-it's as needed  
 No pest found

**PRODUCTS APPLICATION SUMMARY**

Material	Lot #	EPA #	A.I. %	A.I. Conc.	Active Ingredient	Finished Qty	Undiluted Qty
Catch-its		n/a	0.0000%	n/a	n/a	18.0000 Each	
<b>Areas Applied:</b> Interior							
<b>Target Pests:</b> (None)							

**AREA COMMENTS**

None Noted.

**INSPECTION DETAIL**

Area	Time	Type	Status	Pest Findings
Interior	2:04:51 PM	Area	No Activity	

**PRODUCTS APPLIED**

Material	A.I. %	Finished Qty	Application Equipment	Application Rate	Lot #
EPA #	A.I. Concentration	Undiluted Qty	Application Method	Sq/Cu/L Ft	
Catch-its	0.0000%	18.0000 Each			
	n/a				
<b>Areas Applied:</b> Interior - Interior					